

## UNITED STATES DISTRICT COURT

for the  
District of Minnesota

United States of America

v.

Isaiah Bell (25)

Case No. CR 23-160 WMW/TNL

\_\_\_\_\_  
*Defendant*

## ARREST WARRANT

To: Any authorized law enforcement officer

**YOU ARE COMMANDED** to arrest and bring before a United States magistrate judge without unnecessary delay*(name of person to be arrested)* Isaiah Bell,

who is accused of an offense or violation based on the following document filed with the court:

☒ Indictment      Superseding Indictment      Information      Superseding Information      Complaint  
 Probation Violation Petition      Supervised Release Violation Petition      Violation Notice      Order of the Court

This offense is briefly described as follows:

Pretrial Release Violation Petition

Count 3 – Conspiracy to Distribute Controlled Substances, 21:841(a)(1), 841(b)(1)(A), 841(b)(1)(B), 841(b)(1)(C) and 846.

Date: 04/26/2023City and state: Minneapolis, MN

*Kate M. Fogarty*  
\_\_\_\_\_  
*Issuing officer's signature*

Kate M. Fogarty, Clerk of Court  
\_\_\_\_\_  
*Printed name and title*

## Return

This warrant was received on *(date)* \_\_\_\_\_, and the person was arrested on *(date)* \_\_\_\_\_  
at *(city and state)* \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Arresting officer's signature*

\_\_\_\_\_  
*Printed name and title*

**This second page contains personal identifiers provided for law-enforcement use only  
and therefore should not be filed in court with the executed warrant unless under seal.**

*(Not for Public Disclosure)*

Name of defendant/offender: \_\_\_\_\_

Known aliases: \_\_\_\_\_

Last known residence: \_\_\_\_\_

Prior addresses to which defendant/offender may still have ties: \_\_\_\_\_

Last known employment: \_\_\_\_\_

Last known telephone numbers: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Social Security number: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Scars, tattoos, other distinguishing marks: \_\_\_\_\_

History of violence, weapons, drug use: \_\_\_\_\_

Known family, friends, and other associates (*name, relation, address, phone number*): \_\_\_\_\_

FBI number: \_\_\_\_\_

Complete description of auto: \_\_\_\_\_

Investigative agency and address: \_\_\_\_\_

Name and telephone numbers (office and cell) of pretrial services or probation officer (*if applicable*): \_\_\_\_\_

Date of last contact with pretrial services or probation officer (*if applicable*): \_\_\_\_\_